Testimony of

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Good afternoon, Chairwoman Allen and members of the Committee on Human Services. I am Olivia Golden, director of the D.C. Child and Family Services Agency. Thank you for this opportunity to report on the status of reform at CFSA and for your continued and steadfast support of our reform efforts.

I would like to take the opportunity today to report to you on four major themes:

- The critical juncture we have reached in the *LaShawn v Williams* lawsuit, including ending probation and facing several more years of continued reform;
- What CFSA has accomplished in the past year to improve performance and provide better outcomes for the District's most vulnerable children and families:
- Why partnerships are critical to building a strong safety net for local children and families, and
- How others can play a vital role in helping us complete the multi-year task of reforming child welfare in the District

Status of LaShawn Lawsuit

Within the last six months, CFSA achieved a major milestone. In October, as I reported at the Committee's last oversight hearing, the Court Monitor in the *LaShawn* lawsuit certified that we had met 75 percent of 20 exacting performance goals and recommended an end to CFSA's one-year probation period. Today, I can report that in January, Federal Judge Hogan certified CFSA's

completion of probation, which successfully demonstrates the District's capacity to mobilize and maintain momentum for change.

The end of CFSA's probation does not mean the end of the lawsuit, however. We are now facing several years of hard work to meet the requirements of the Modified Final Order, which is the original consent decree the District signed in 1993, and other remedial orders. Now, the District must substantially comply with requirements in these orders to end Federal Court involvement.

In addition to its legal force, the MFO offers a compelling vision of safety, permanence, and well being for abused and neglected children. It envisions a District where:

- Prompt, thorough, quality investigations protect children at risk and screen them appropriately for health and mental health issues;
- A broad range of services in the community help children remain at or return home safely—or, when those options are not possible, grow up in nurturing adoptive families;
- Support is readily available to help foster, kinship, and adoptive parents meet children's health, mental health, and other needs;
- Children almost always live with families and only rarely in group settings;
- Foster children have as much continuity and stability as possible, including opportunities to live with their brothers and sisters, to bond with one foster or kinship family rather than move among many placements, and to see their parents often as long as reunification is the goal; and
- Social worker caseloads are low enough that both CFSA and private-partner social workers routinely provide quality case management while expanding their skills through pre-service and in-service training.

For several months, the District, Federal Court Monitor, and plaintiffs have been negotiating an Implementation Plan designed to improve the key areas of local child welfare in keeping with this vision. We are hopeful that those negotiations are now nearing closure. The final

Implementation Plan will mandate and direct continued reform of CFSA over the next several years. It will mean meeting measurable benchmarks within specific time frames. And it will mean achieving substantial compliance of the MFO, so that federal court oversight will terminate and further legal action will be avoided.

As a member of the District's negotiating team, I expect the final Implementation Plan will challenge us to move beyond our achievements to date to develop a well functioning urban child welfare system. I also expect that CFSA will need to continue, and perhaps even increase, the fast-paced rate of change we have struggled to establish over the past two years. However, with continued reform inside our agency and sustained support from outside, the District now has two unprecedented opportunities: first, to establish the strong public child protection program local children and families deserve and second, to end the *LaShawn* lawsuit. The challenge will be great, the demands high, and the time frame extended over several years. But the time is right to continue our momentum and achieve significant positive outcomes for children, families, and the city. This payoff is clearly well worth all our best efforts and support. At your next round of hearings, I expect to be able to present details of CFSA's final Implementation Plan.

CFSA Performance Achievements

While ending probation and moving on to negotiate a long-range Implementation Plan were causes for celebration at CFSA, we have not rested on our laurels. Building a strong local safety net for children and families is an all-consuming, long-term job. Successful reform of child welfare systems in New York, Chicago, St. Louis, and other urban areas has shown there are no quick fixes for decades of neglect—only slow, steady, persistent, incremental improvement.

Under our own strategic plan and an Interim Implementation Plan covering the period between the end of probation and establishment of the final Implementation Plan, CFSA has continued to demonstrate tangible progress.

To show how seemingly abstract improvements are making a difference in human terms, I want to tell you about a boy I'll call Michael. In CFSA's drive to replace group homes with family settings, especially for children age six and under, Michael posed several challenges. He has been blind and mute from birth, with his father as his primary caretaker. When a family crisis temporarily overwhelmed his father, Michael entered a group home at age 4. Two years later, Father was stable, but Michael remained in group care. Everyone, including Father, recognized that Michael had made progress through specialized services while in the group home—for example, enrollment in a school for blind children. So the challenge was to connect Father to services that would support him in meeting Michael's special needs. Among services CFSA located and put in place are: a home health aide to provide respite for Father, an introduction to Michael's pediatrician of two years, a visiting nurse, individual and family therapy to help Father learn how to interact with Michael more fully, and referrals to local sources of Braille materials and special toys. Last month, Michael went home with his father. For now, he continues to attend the school for blind children. Someday, with accommodations, he may be able to attend a mainstream classroom.

Our goal is to achieve safety, permanence, and well being not just for one, or a dozen, or a hundred but for the thousands of children who need the District's protection every year. To provide a context for the scale of the task ahead, in fiscal year 2002, our 24-hour line for

reporting child abuse and neglect received an average of 640 calls monthly. About 440—or 69 percent--of those calls met the criteria for abuse or neglect and were referred for investigation. In an average month, CFSA served some 3,119 children in paid placements, another 384 in unpaid "third-party" placements, and about 2,301 families with children at home. At the end of FY 02, we had 1,803 children adopted from foster care and living in adoptive homes, with support from the District's subsidized adoptions program.

For the sake of all of those children, CFSA must continue to move forward on several fronts.

Chief among these are: recruiting and retaining staff, improving service quality, and delivering positive results for children and families.

Staff Recruitment/Retention

Recruitment and retention of a full complement of qualified social workers are essential to reducing individual caseloads, which, in turn, will vastly improve child protection. Currently, CFSA has approximately 270 licensed masters- and bachelors-level social workers. This represents a net increase of 30 social workers over the past year and falls slightly short of our goal of 300 social workers, total, in fiscal year 2002. If we had counted both licensed social workers and social work graduates in trainee positions pending licensure, we would have exceeded the goal with a total of 304 social workers. However, since District law does not allow unlicensed social workers to carry cases, we did not count our unlicensed trainees.

In FY 02, we established a policy that required trainees hired pending licensure to pass the licensing exam within 90 days. However, the number of student trainees who passed the exam

within that deadline did not meet projections. Based on that lesson learned, we are now encouraging schools of social work to apprise students of the benefits of taking the licensing exam during their last semester, recommending that unlicensed candidates take the exam before applying, and recruiting more licensed social workers.

In FY03, our goal is to end the year with a total of 310 licensed social workers. As of mid-February, CFSA had hired 22 MSWs, 10 BSWs, and one Public Health Service MSW under the District's Memorandum of Understanding with the U.S. Department of Health and Human Services.

Our retention of social workers is relatively strong. Of licensed social workers hired during FY 02, all but one remain on board. For all licensed social workers at CFSA, the turnover rate was 17 percent—or slightly below the annual average of 20 percent for state child welfare agencies. We continue to work on improving retention through strategies such as reducing caseloads, upgrading training, and providing more support for doing a tough job.

As a result of new hires, careful tracking, and more timely case closures, CFSA is reducing individual social worker caseloads. We believe that lower caseloads per worker mean better service for children and families, and we are also working towards the caseload standards for social workers set by the MFO. We expect these standards to be included in the long-range Implementation Plan and are already working to achieve them.

In Investigations, the MFO sets a standard of 12 cases per worker. CFSA is rapidly closing in on that goal. We have reduced the average caseload of Investigations social workers to 10. Of the 55 investigators currently on staff, 45 have 12 cases or less. Seasonal and other variations in calls to our child abuse and neglect reporting line (202) 671-SAFE mean that caseloads in Investigations fluctuate widely. Adding 10 staff members to Investigations in the coming months should keep individual caseloads at 12 or below, even during periods of heavy reporting.

For Ongoing social workers, the MFO sets standards of 17 in-home cases per worker, 20 "regular" foster care cases per worker, and 12 special-needs foster care cases per worker. CFSA is also making progress toward these goals. A year ago, Ongoing social workers were carrying an estimated average of 30 to 35 cases. Today, that average has dropped to 24 cases per worker. Last August, 18 Ongoing social workers were carrying more than 50 cases. Today, no Ongoing worker has more than 50 cases, and we expect to bring all caseloads below 40 within the next few weeks.

Equally important, CFSA has significantly reduced unassigned cases and cases assigned to supervisors. What's more, we have improved automated tracking of case assignments. Managers now review caseloads by individual worker and unit each week, which allows them to focus on relieving those workers still carrying high caseloads.

These achievements are a direct result of the District's commitment to and budgetary support of child welfare reform. CFSA is using allocated resources to staff up and reduce caseloads, which directly translates to improved safety and service for children. Our appreciation for the city's

support is matched only by our eagerness to spread the news about the tangible positive difference it is making in the lives of vulnerable children and troubled families.

Among the key strategies leading to these recruitment and retention accomplishments are aggressive outreach to both local and selected distant colleges and universities with schools of social work, participation in major conferences in the social work field, increased advertising, and targeting bi-lingual candidates. As our recruiters move ahead on these strategies, they are tracking results so they can make adjustments to improve effectiveness throughout this year. In addition, CFSA has recently hired an extremely qualified General Counsel and an experienced Human Resources director. The revamped senior staff team at CFSA is now fully in place, along with individual performance goals that match requirements of the *LaShawn* MFO.

<u>Training:</u> Pre-Service Training is a competency-based, four month program of classroom and on the job training designed to prepare new social workers and supervisors for effective delivery of child welfare services. It includes theoretical, skill building, and practical learning experiences. In addition, trainees receive intensive supervision in a training unit. They learn about CFSA's structure, goals, and mission and about legal aspects of child welfare. We are proud to report that our recruiters have heard from candidates that word has spread about these new training units, which enable new workers to learn how to handle the pace and intensity of CFSA's work with close guidance. These new units are a drawing card for CFSA compared to other organizations.

During the past year, the CFSA Training Academy has offered the following courses for the first time: joint training of foster parents and social workers, orientation for non-social work staff, and training for the magistrate judges of the Family Court in conjunction with the Corporation Counsel. In the year ahead, we will continue to strengthen and expand the design of the training office to ensure that our efforts impact the quality of practice and staff development critical to improving outcomes for children in care.

Improved Service Quality

Ensuring children's safety, providing opportunities for them to grow up in stable families, and supporting well being of both children and families require quality services. We are working to raise the bar for services provided by our contracted and community partners through two different but complementary strategies:

- Implementation of the new licensing authority assigned to CFSA in 2001 and
- an aggressive and proactive program of contract reform.

Licensing and Monitoring: Licensing of Youth Residential Facilities has been in the making for 15 years following passage of the Youth Residential Licensure Act of 1986. The group home regulations became final in September, 2001; the foster home regulations became final in July, 2001; and the Independent Living Program regulations became final in February, 2002.

Last spring and summer, the Office of Licensing and Monitoring within CFSA began the process of licensing providers who operate group homes and independent living facilities. Throughout the process, CFSA provided technical assistance to help facilities get licensed and inspected all

facilities. CFSA met the deadlines for licensing of all 26 Independent Living and group home providers. As a result, CFSA has so far issued one full license and 25 restricted or provisional licenses. The standards have already made a significant difference in the quality of facilities where our young people live, including repairs, renovations, and in some cases a shift to new space. In addition, the licensing process has intensified our focus on staffing, both quality and numbers, as well as the content of the program. For facilities, compliance with regulations can mean significant investments in plant and operations. We are working with current providers to determine their needs, we review estimates they submit, and assess whether new rates supported by the FY03 appropriations, are needed.

Contract Reform: Like most child welfare agencies, CFSA has long purchased a range of services for children and families from outside providers. Traditionally, CFSA's contracts have not set standards for provider performance. Without clear standards, it has been difficult to hold providers accountable for the quality of results, reward providers who do excellent work, or offer incentives for achieving outstanding outcomes for children and families. The District's historic over-reliance on congregate care for children of all ages has been reflected in a preponderance of contracts simply to "house" children and youth.

Times have changed. CFSA is becoming a performance-based organization striving to achieve measurable goals. Our values center on safety, permanence, and well being for children. Whenever possible, we want to keep children at home while supporting their families with effective, community-based programs. When children cannot remain at home safely, we want to

place them in home-like settings. And we have an obligation to meet the needs of abused and neglected children through high-quality, specialized services that achieve results.

Our contract reform is a bold initiative designed to ensure that CFSA's performance-based posture and best practices in modern child welfare are reflected in the services we buy. It is a vehicle for stimulating increased availability of community-based services in the District, reducing reliance on group homes, making providers accountable for delivering positive outcomes for children and families, offering incentives for outstanding results, and ensuring good use of public funds to meet community needs.

Last August, CFSA met with providers to announce the contract reform initiative and involve them in the process. During the fall, we gathered provider input through focus groups. In January, we circulated draft Requests for Information. The deadline for comments just passed about a month ago. We appreciate the extensive, valuable feedback we received from providers, Superior Court, the Federal Court Monitor and plaintiffs, and community members, and we are now reviewing all comments with care. The next step will involve drafting three new global Requests for Proposals that will seek an expanded range of quality offerings in the areas of Congregate Care, Family-based Care, and Community-based Care and Preventive Services. We expect to put these RFPs out for bid this spring and to launch the new contracts in late summer.

Better Outcomes for Children and Families

Meanwhile, as CFSA works toward demanding better outcomes for children and families from providers, we strive to lead by example in making the same demand within our own agency.

Better outcomes for those we serve are beginning to accrue from: timely investigations, improved agency processes, continued reductions in reliance on congregate care, improving the timeliness of adoption and guardianship for children who cannot return to their birth homes, foster home recruitment, CFSA's evolving relationship with Family Court, and better information through automation. In each of these areas, we have come a long way but still have a very long way to go.

Investigations: As the first line of defense, CFSA's Intake and Investigations function plays a critical role in protecting abused and neglected children. I've already reported that staffing is up and caseloads are down in this function. We are also making progress in timeliness of investigations. We have reduced our backlog of investigations open more than 30 days from more than 800 in May 2001 to 263 in May 2002 to 93 in January 2003.

<u>Processes:</u> Clearly defined, smoothly running processes must be in place for CFSA to serve children and families promptly and effectively. It is even better when our processes reflect best practices in child welfare. Much internal work of the agency over the past 18 months has been devoted to establishing new and improved workflows and mending broken procedures. In the day-to-day scheme, this aspect of reform is neither exciting nor glamorous. It is just hard work. The excitement comes later, when we see how much more we can do for children and families once we get out of our own way. Several examples from CFSA's innovative Clinical Practice function, which includes Quality Assurance, illustrate this point.

CFSA is reengineering the administrative case practice process to: develop better case plans, give families a voice in case planning, improve case oversight, ensure timely case reviews in compliance with the Adoption and Safe Families Act, and strengthen our partnerships with providers in serving children and families. Last November, CFSA began phasing in three improvements.

First, the Adoption and Safe Families Act requires administrative case reviews every six months. To ensure compliance, CFSA is now phasing in pre-administrative reviews specifically to look at the safety, permanency, and well being of each child and make adjustments before the formal administrative review. These pre-reviews take place 30 days before the formal review between CFSA and providers involved in the case. In November, we began phasing 20 percent of cases into the pre-review cycle, with a goal of having all cases in the cycle by October.

Second, within 45 days of opening a <u>new</u> case, CFSA staff are now inviting providers and family members to a Family Case Plan Conference. The goal is for all professional participants to engage with the family in developing a case plan. At this time, about 30 percent of new cases are phased in to this approach.

Finally, we are holding formal administrative case reviews every six months jointly with providers and other key stakeholders. While these improvements do not sound exciting in the telling, engaging families in case planning leads to vastly increased comfort and buy-in for them, and improved results for children. In addition, increased provider involvement in this process

improves their partnership with CFSA and the family—and is an important to complement to our contract reform initiative.

A second example is the disruption conferences that we are working to put in place led by our Office of Clinical Practice. Disruption conferences seek to resolve issues threatening a child's placement in foster care. The goal is problem solving through wraparound services and increased stability for children. These conferences also support social workers in tapping special expertise to assist with crises in foster-care placements.

Yet a third example is CFSA's participation on the Multi-Agency Planning Team—or MAPT. Led by the Department of Mental Health, MAPT is a collaborative of several local public organizations such as Addiction Prevention and Recovery, CFSA, Health, Human Services, Medical Assistance, MR/DD, the public schools, Superior Court, and Youth Services. It coordinates and facilitates access to services for children and youth at risk of more restrictive placement or returning to family and community from residential treatment. These youngsters typically have multiple issues and are involved with multiple agencies. MAPT's goal is to serve children and youth in the community rather than in highly restrictive and costly residential treatment facilities, juvenile institutions, and acute-care hospitals. When possible, serving children in the community is better for them than institutionalization.

The following story illustrates how MAPT works. Seventeen-year-old Anna has experienced at least 15 psychiatric hospitalizations since becoming involved with CFSA at age 12. Her father and grandmother love Anna, but they are worn out from dealing with her bi-polar and behavioral

disorders, seizures, verbal and physical violence, substance abuse, and running away. They wanted Anna placed in a residential treatment facility. Anna's CFSA caseworker hoped to keep Anna in the community and in contact with her family, so she referred Anna's case to MAPT. Through MAPT, Anna has been able to stay in the community with intensive, coordinated, multi-agency support. These services include: placement in a foster home that can meet her needs, intensive case management, referral to a local psychiatrist, involvement with a mentor, enrollment in an education-based day treatment program, and a part-time job. The difference for Anna is that her family and the agencies worked together to coordinate services for her. This is very different than hasty assembly of fragmented services in the past. Anna's difficulties are severe, and she may or may not be able to remain in the community. But for now, MAPT has provided access to intensive, coordinated local services; Anna has been diverted from a restrictive residential placement; and she is engaged in school and with the providers and not running away.

In January, CFSA referred 24 cases to MAPT, with nine accepted for staffing. In addition, MAPT diverted seven children from residential placement and approved two for residential treatment.

Congregate Care: Children grow up better in families, and in family-like settings, that offer opportunities for emotional bonding with stable caretakers and training in critical life skills.

CFSA is continuing to dramatically reduce the number of children age 12 and under in congregate care as well as those placed more than 100 miles away from the District.

CFSA reduced the number of children under age 6 in congregate care from 99 in May 2001 to 49 in May 2002. This was a 53 percent reduction and was noted as a significant accomplishment by the Court Monitor in her October 2002 report. During the summer and fall of 2002, CFSA focused on reducing the number of children age 12 and under in congregate care and committed in the Interim Implementation Plan to a reduction in this number. The number of children age 12 and under in congregate care dropped from 130 as of May 31, 2002 to 68 as of December 31, 2002 of whom approximately 25 are under the age of 6. As of September 30, 2002, the total numbers of children in placement outside of the District was 1,831 and as of January 31, 2003, 1,742. As of May 2002, we had successfully reduced the number of children outside of the 100 miles radius of the District from 83 in 2001 to 65.

Adoption and Guardianship: In FY 02, CFSA finalized 313 adoptions, which slightly exceeded the goal of 300 and represented a major increase from last year. Key elements of this accomplishment were close collaboration with the Superior Court, improved legal support for CFSA, and emphasis on tracking progress. In FY 03, we anticipate improving further our process for ensuring that children who can not live with their birth parents are able to grow up with a loving family. These include holding immediate permanency staffings as soon as the court determines a child cannot go home, further improvements in legal support and filings to terminate parental rights, and award of a contract for an Adoption Resource Center to support adoptive parents.

Currently, we have 30 relatives in the process of obtaining subsidized guardianship. Five relatives have completed the process, as did two last year. We appreciate your support of

subsidized guardianship as an approach to achieving permanence for a child when a relative is prepared to make a lifetime commitment but not to terminate parental rights.

Foster, Adoptive and Kin Parent Recruitment: Our vision is to increase our numbers of resource family homes in the District of Columbia of foster, adoptive or kin homes. Currently we have 150 traditional foster homes, 350 kin homes and 4 proctor homes within the District. We are committed to placing children in the neighborhoods and communities form where they are removed to minimize the trauma and the significant losses that children experience as a result of placement in foster care. We are focusing therefore on geographically sensitive recruitment to increase numbers of resource parents in those wards from where more children are being removed, and child specific recruitment to improve permanency, safety and wellbeing for children and families through reunification or adoption. The faith community has been a strong partner with us in these efforts. They are helping us recruit foster, adoptive and kin families. They are also helping us engage the birth families with foster and adoptive families and to help link to appropriate community supports that strengthen child safety and permanency goals. We are also expanding our Proctor Parent Program and building capacity for them to meet the needs of the behaviorally challenged children and the medically fragile population.

We have also successfully negotiated a contractual arrangement with the Foster Parent Association of DC to offer three distinct services to our resource families that will be operational by late spring of 2003. The Association will identify members who will co-facilitate with CFSA staff pre-service and in-service training and all our policies and procedures to foster, adoptive and kin parents to make them more responsive to the needs of our resource families and be

compliant with regulations.. The Association will also facilitate support groups for our foster, adoptive and kin families. Lastly, they will administer satisfaction surveys to resource parents.

Family Court: For too many years, poor relationships among CFSA, Superior Court, and the Corporation Counsel created problems for children and families in the system. Today, we are working together towards the same goals. Last October, the Council for Court Excellence released a report that stated:

The major public stakeholders in the DC child welfare system—the DC Superior Court, the Child and Family Services Agency (CFSA), and the Office of the Corporation Counsel (OCC)—are working collaboratively to make major structural changes that will position the city to achieve dramatically improved outcomes for children.

An extraordinary partnership between the Corporation Counsel and CFSA has reformed legal support for our agency. A little less than one year ago, we co-located a dramatically expanded team of attorneys with CFSA and began reforming attorney support of social workers. Today, social workers have legal representation in 95 percent of all hearings. Our legal staff has been reorganized to work in teams with Superior Court judicial teams. Each lawyer is currently shifting to "vertical prosecution," which means seeing a case through from initial hearing all the way to permanency, with the goal of more timely and better decision-making on behalf of children.

CFSA continues to work closely with the Family Court as this new entity evolves. I meet regularly with Presiding Judge Lee Satterfield to identify issues that we need to tackle jointly to benefit children. Last fall, CFSA participated actively in design and implementation of the first cross-training, hosted by the Family Court, on systems of care. Also in the fall, CFSA worked

closely with the Court to design the best way to transfer cases to the new teams of magistrate and associate judges in the Family Court. We provided automated systems support so that cases from one of CFSA's administrations would be assigned to just two or three teams of judges. This would enable judges, attorneys, and CFSA social workers to develop shared expectations and to work together more closely. We are working with the Court with the goal of designing a schedule that will ensure social workers some time without court appearances, freeing them to make visits and conduct other work. Finally, we are collaborating closely with the Court in the area of information systems. We have just initiated a project to scan court orders into our automated system so that everyone involved at CFSA has complete and accurate information.

Improved Data Management: Good information plays a critical role in helping to ensure safety for children, assessing their well-being, and tracking progress toward placement in permanent homes. Supervisors can now get safety information from CFSA's automated system. For example, each supervisor can access reports that track social worker visits to children in the last month. These management reports are updated daily and available to supervisors through a few clicks of the mouse.

This is one of many recent improvements in CFSA's automated case management system called FACES. As the quality of FACES information improves, it becomes a more useful tool for managing the agency. Last fall, the Court Monitor noted improvements in the quality of FACES in her report. In April, FACES will receive an award from *Computerworld* magazine for being a leader in automating child welfare case management.

Other automation initiatives are improving our effectiveness. For example, access to the District's criminal justice information system helps our investigators locate missing parents quickly--a critical step in the adoption process.

We are increasingly using data to shape policy. For example, we now are able to look at the ages of children in placement and compare that to the ages of children entering care. Most children entering care are younger than age 15. Only 23 percent are age 15 or older, and only two percent are age 18 or older. In contrast, 13 percent of the foster children in care at CFSA are age 18 or older, and 30 percent are age 15 or older. The large numbers of youth in foster care at age 18 and older raises policy issues about the appropriate role of the foster care system as these youth transition to adulthood.

Partnerships

Almost all the performance achievements I've been describing are the result of partnerships: with foster and adoptive parents, providers, Family Court, other agencies, and many others. The strong local safety net children and families deserve will ultimately be woven through partnerships. The child welfare function is essential, but it is only one component among a vast array of services that abused and neglected children need to overcome their difficulties and thrive. Other public and private agencies and community members have important roles to play. CFSA's status as a cabinet-level agency has opened the door to improved working relationships with other District agencies. On behalf of those we serve, we must exploit this wonderful opportunity.

A prime example is CFSA's developing links with the Department of Mental Health. As we conduct clinical staffings and review cases at CFSA, over and over we see mental health needs that must be met if children are to be safe, grow up in stable families, and thrive. Children need counseling to rise above abuse and neglect. Parents need mental health services to overcome their own crises and keep their children safe. Foster parents need access to emergency help when a foster child has a crisis in the middle of the night. Social workers need expert mental health consultation to assess the risks of a child's return home.

To access more and better mental health services for those we serve, CFSA is developing a strong collaboration with the District's Department of Mental Health. The timing is perfect because DMH is under its own court deadlines and is just as intent as CFSA on strengthening the local safety net for children and families. Senior members of our two agencies met for a day-long retreat a few weeks ago and developed a detailed work plan that focuses on access to services, development of provider capacity, service definition, Medicaid reimbursement, and other issues. I am grateful for your unflagging commitment to both agencies, and I look forward to updating you on our progress.

CFSA's partnership with the Collaboratives continues to provide services that strengthen families in their communities, provide support to children in foster care in the communities where they live and support efforts to reunite children in foster care with their families. During the past year, CFSA and the Collaboratives built upon its partnership by taking a more targeted approach in examining ways to strengthen service delivery for children and families in the District. As a

result of this concentrated effort, I am delighted to report that in 2002 two Collaboratives have instituted Emergency Assessment programs, providing intensive preventive services to families in their own communities and diverting families from ongoing involvement with the child welfare system. In addition, we have entered into new service delivery contracts with the Collaboratives in three distinct areas -preventative, supportive and aftercare. Services offered within these targeted areas include case management; visitation; housing assistance; parent, caregiver, and foster parent support; support for family visitation; and information and referral. Our partnership throughout the years with the Collaboratives has shown that family-centered, culturally competent practice that provides integrated community based services truly makes a difference in the lives of children and families entering and exiting the child welfare system.

Next Steps

With continued commitment from the Mayor and Council to local child welfare reform, CFSA can build on the momentum and progress of our first 18 months as a District agency. With the receivership and probation behind us, we must seize the opportunity over the next several years to:

- establish a strong safety net for local children and families;
- build a District-wide vision of services that support children's safety, enhance the likelihood that every child can grow up in a stable and loving family, and support child and family wellbeing; and
- end the *LaShawn* lawsuit.

Within CFSA, this will require rigorous management, including an active revenue collection agenda, and diligent practice to achieve measurable performance improvements. Externally, it will mean continued political will and financial support and increased community involvement.

Revenue and Savings: In FY02, the District worked to clean up past Medicaid billings to ensure future years are solid. With support from other agencies, including the Office of Public Provider Medicaid Reform under the Deputy Mayor, CFSA increased Federal revenue under both Medicaid and Title IV-E. From Medicaid, CFSA collected \$32 million of a \$35 million target. We also made major improvements in billing. In response to a Federal audit, CFSA worked with other District agencies to develop a billing approach based solely on automated records, and the Federal government accepted it. In Title IVE, CFSA exceeded the FY02 target by \$1.5 million through a major focus on improving automated systems, better coordination with the court, and addressing a backlog of claims.

CFSA is committed to steady improvement in Medicaid revenues, with the new billing mechanism in place, a Cost Allocation Plan underway, and rate increases expected for FY01 and FY02. In addition, our FY03 budget includes a commitment to \$2.4 million in savings through collaboration with the Department of Mental Health. We expect to reduce the number of children in residential settings funded from proportionally higher local dollars and reduce the share of clinical services that we pay for with fully local dollars.

<u>Legislative Agenda:</u> We look forward to working with the Committee on a range of initiatives to support reform. First, we are working closely with the Consortium for Child Welfare to help draft the next phase of the consolidated child welfare bill. Last year, a decision was made to phase in the original legislative proposal in two parts. The first part was passed as the Establishment Act, which focused on creation of CFSA as a cabinet-level agency. The second

part is the "nuts and bolts" of process. We hope to submit the Child in Need of Protection Act that captures other child welfare issues that need to be consolidated into a single bill by summer of this year. Second, we also hope to submit other legislative initiatives that are outside the scope of the Child in Need of Protection Act as individual pieces of legislation throughout the year as appropriate.

In conclusion, I am deeply grateful for your ongoing leadership and commitment, and I look forward to continuing our work together on behalf of the District's children and families.

Thank you, and I look forward to answering any questions.